



NorthStar

Community Services

Residential House Lead / New Hire Checklist for 3 Supervised Training Days or Cross Training Day

Location: Pone hall Staff Name: Gabrielle Ferguson

3 Supervised Training Dates: Oct 7, 10, 12 + 14 2024

OR

Cross Training Date: NA

Topic	Date	Lead Initials	New Hire Initials
Complete Med Pass Sheet. New Hire and when staff Cross Train.	10-10-2024	EH	G.F
Emergency Binder: Where it is located, Fire Drills, water temps, incident reports including injury and serious injury and quarterly emergency procedure.	10-7-2024	EH	G.F
Data Tracking and managing goals and location.	10-7-2024	EH	G.F
Daily House Task and Checklist and location.	10-7-2024	EH	G.F
Funds Management & Money Logs and location.	10-7-2024	EH	G.F
Menus and food preparation and location.	10-7-2024	EH	G.F
Daily Communication Log and location.	10-7-2024	EH	G.F
Appointment Communication Logs – Med Logbook: PRN documentation, appt log, meds rec'd/ordered, receiving Narcotics (Narc Sheet), standing order sheet, med error form, med set-up record (meds sent out sheet) and location.	10-7-2024	EH	G.F
Location of First Aid Kit, Fire Extinguisher, Med Cabinet.	10-7-2024	EH	G.F

Topic	Date	Lead Initials	New Hire Initials
Go over each client's behaviors, what to expect, what to look for, what works, what doesn't work. What staff can and cannot do and what triggers them.	10-10-24	EH	G.F
Go over any special or unique aspects of the house, things staff need to know about this location.	10-10-24	EK	G.F
Shadow Lead in day to day activities – what does a day look like.	10-16-24	EK	G.F
Chestnut: Client Specific Training & Test			
Cross Lake: Equipment Training			
Granite: Client Specific Training & Test			
Maple Grove/Hillside/Oak: Sign Language Training			
New Hire Questions. (Is staff ready to be on their own, if not, schedule another supervised training day.)	10-16-24	EH	G.F
PAPP Read	10-16-24	EK	G.F.
Cross Trained Staff Only Read client files and complete, sign and date client acknowledgement form.			

House Lead and New Hire **print, sign** and **date** below before turning in.

Esperanza Hingbanc *Esperanza Hingbanc* 10-18-24
 House Lead Printed Name Signature Date

Gabrielle Ferguson *Gabille Ferguson* 10-18-24
 New Hire Printed Name Signature Date

*****Return to the Training Coordinator as soon the supervised training and the Med Pass Sheet has been completed.**